PSJ3 Exhibit 33

Project Pearl Internal Discussion Guide

Confidential

Pharmaceuticals Group Business Development

July 31, 2019

Project Objective/ Rationale

Build a partnership between Pearl and J&J that leverages each partner's assets and capabilities to create a Pain Management Franchise that is significantly larger and more profitable than that which the partners could build on their own

Background/ Status

- Agreement reached to meet for a discussion of partnership alternatives- scheduled for September 6
- J&J Work Team assembled to generate idea(s) and identify key issues- L. Ferrari, B. Fitzsimons, M. Grissinger, R. Kuntz
- Three options identified and discussed within the Work Team- to be reviewed with S. Fischer, D. Norton, and R. O'Neil

What Does Each Partner Bring?

J&J

- Sales/Marketing
- Duragesic
- Ultram
- Ultram SR
- Ultracet
- Intellectual property
- R&D pipeline and capabilities

Pearl

- Sales/Marketing
- Oxycontin
- MS Contin
- Ultram SR
- Palladone
- Intellectual property
- R&D pipeline and capabilities

Options Developed for Discussion

- Option 1 Reciprocal Co-promotion rights on all brands
- Option 2 R&D partnership for Codevelopment of new brands
- Option 3 Joint Venture that creates a stand-alone "Pain Company"

Partnership Options: Pro's/Con's

Reciprocal Co-pro	R&D Partnership	Pain Company JV
 Pro's Creates full range of analgesics for physicians Both partners share in brands of others Creates revenue and cost synergies 	Pro's Synergies across R&D teams Shared cost/ risk Leverage patents of both parties	Pro's Creates dedicated "Pain company" – provides focus to grow franchise Clear commitment by both partners Leverages all pain assets of both partners
 Con's Each partner gives up some control Resources requires to manage partnership 	Con's Each partner gives up some control Resources requires to manage partnership	Con's Each partner gives up control Management issues of governance and financial reporting
 Issues How to position all brands in a relevant way to physicians Historic rivalry How to incent reps How to assign dedicated pain sales force within J&J (impact on other brands) 	Issues Past dispute How to determine funding split Governance/ decision making mechanisms	 Issues All issues of other options plus overall governance issues
 <u>F</u>inancial Structure Revenue & profit split on all brands J&J - heavier revenue split Pearl - heavier profit split 	 Financial Structure Negotiate split of dev costs – revenue & profit split to be proportional Co marketing 	 Financial Structure J&J reports sales Pearl receives profit split

Preferred Approach/ Rationale

- Reciprocal Co-promotion
 - Potential for short-term impact vs.. R&D partnership
 - Less complex than JV
 - Positive experience with co-promotions could lead to R&D and broader relationship

Key Issues

- Creating one "pain sales force" within J&J- impact on other J&J brands
- Positioning all brands in a relevant way to physicians
- Establishing appropriate sales force incentives
- Governance
- Deal structure

Next Steps

- Internal discussion of alternatives
- Develop "one Pain Sales force" configuration for J&J
- Refine deal structure for preferred option
- Prepare presentation for September 6 meeting with Pearl

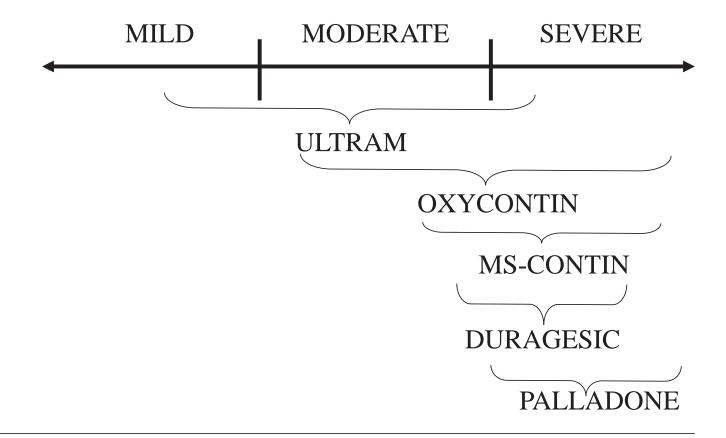
Appendix I

Brand Descriptions & Positioning

Pharmaceuticals Group Business Development

July 31, 2019

Positioning Spectrum



PALLADONE

- Once daily sustained release hydromorphone -- contents can be sprinkled on food -- entirely novel sustained release technology with low abuse potential compared to MS-Contin or OxyContin.
- Indicated for relief of severe pain requiring prolonged use of an oral opioid preparation (Canada).
- Clinical studies in chronic severe cancer pain (Canada)
- Positioning: use in cancer pain based on superior side effect profile compared to morphine.

OXYCONTIN

- Twice or three times daily sustained release oxycodone -- tablets are not designed to be broken and should be taken whole.
- Indicated for patients with moderate to severe pain requiring opioid therapy for more than a few days.
- Positioning:
 - 24 hour pain control
 - Less frequent dosing
 - Single entity agent
 - No "ceiling" effect
 - Improved delivery system allowing both rapid and prolonged release
 - Easy to live with, easy to dose
 - For both cancer and non-cancer pain

DURAGESIC

- Once every 3 days transdermal fentanyl.
- Indicated for the treatment of chronic pain (such as that of malignancy).
- Positioning:
 - 72 hour pain control
 - Less frequent dosing
 - both cancer and non-cancer pain
- Product growing in non-malignant pain
- Strategy to move down in pain spectrum and broaden use beyond cancer.

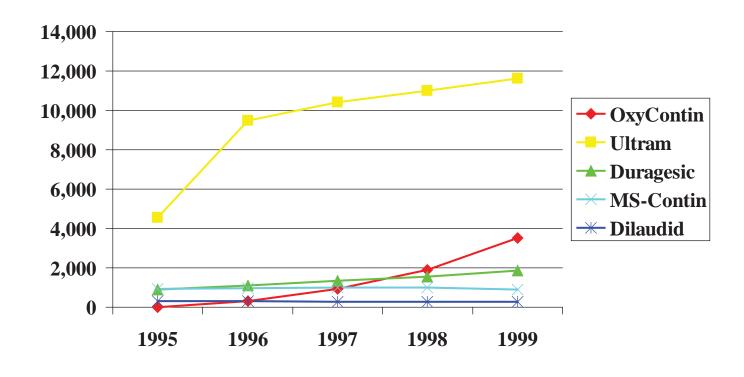
ULTRAM

- One to two tablets every 4-6 hours oral tramadol.
- Indicated for the treatment of moderate to moderately severe pain:
 - low addiction potential, non-scheduled
 - both cancer and non-cancer pain
- Strategy to use in place of opioids to control moderate to moderately severe pain.

MS-CONTIN

- Twice or three times daily sustained release morphine -- tablets are not designed to be broken and should be taken whole.
- Indicated for patients with moderate to severe pain requiring strong opioid therapy for more than a few days.
- Positioning:
 - 24 hour pain control
 - Less frequent dosing
 - For both cancer and non-cancer pain
- Generic -- While sales are declining (-10%), still worth over \$140 million, some of that is price increase (have lost about \$60 million in revenues to generics)

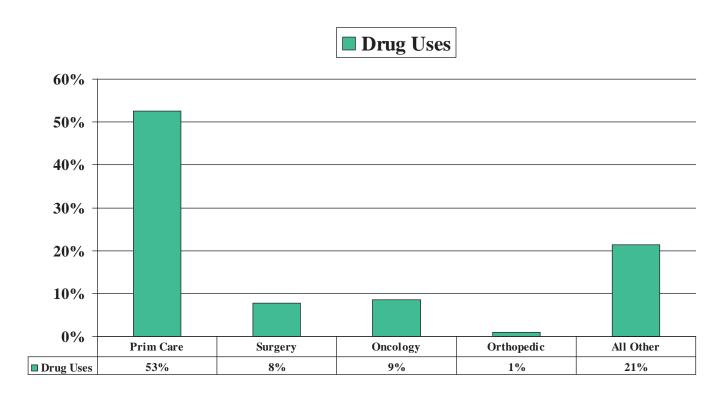
Total Prescriptions 000's



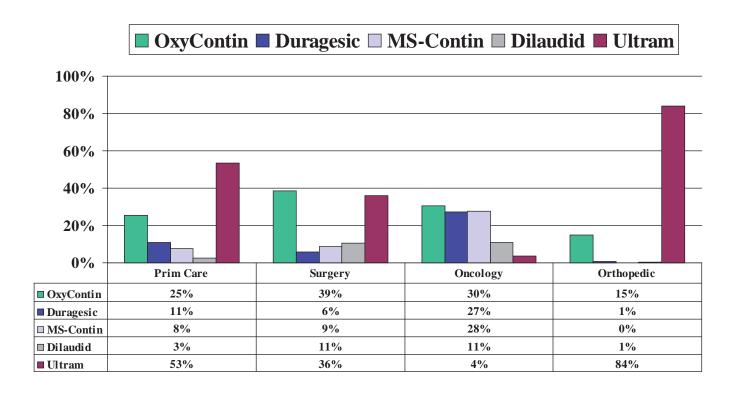
Pharmaceuticals Group Business Development

July 31, 2019

Use by Specialty



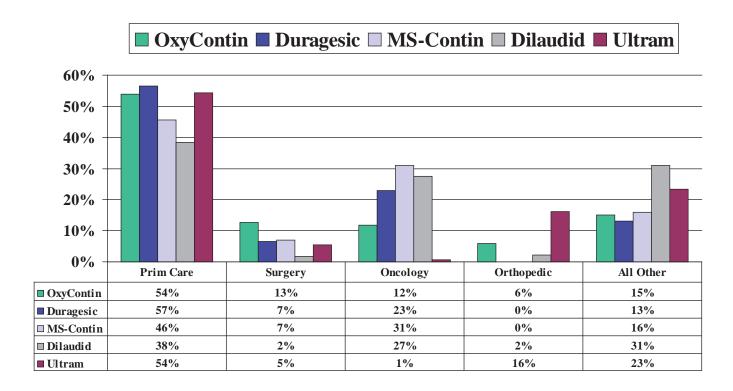
Share by Specialty



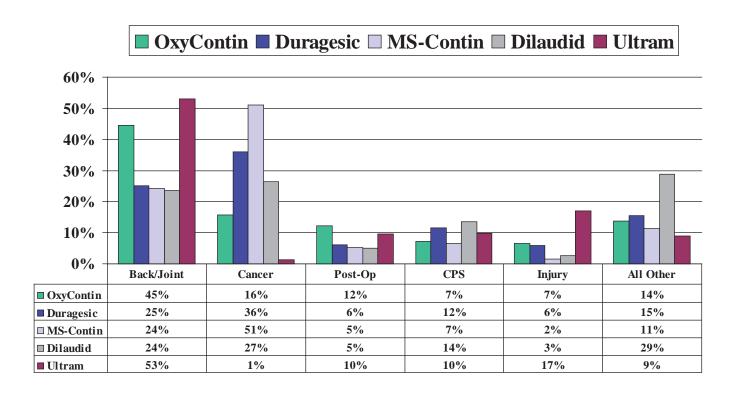
Target Physician Audience

	MS-Contin	OxyContin	Ultram	Duragesic	Palladone
Primary Care		4	4	4	
Oncology	4	4	4	4	4
Surgery		4	4		
Orth Surg		4	4	4	
Pain Spec	4	4	4	4	4

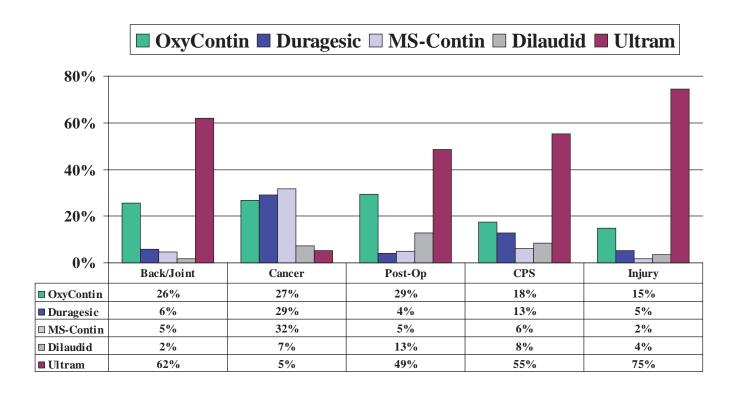
Use by Specialty



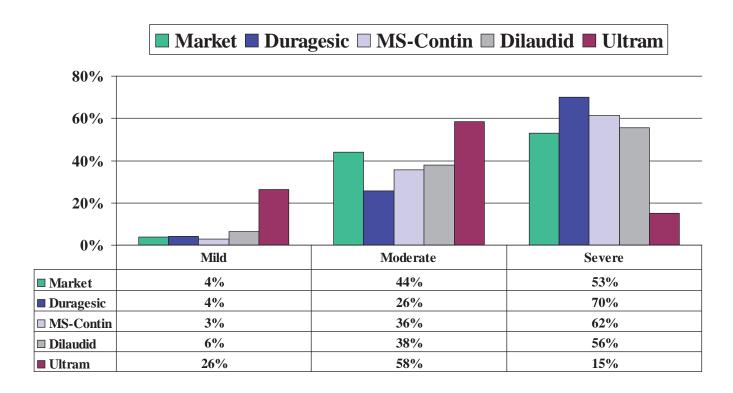
Use by Diagnosis



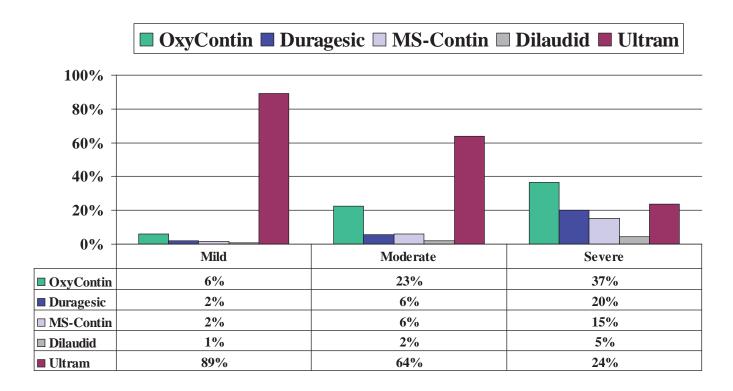
Share by Diagnosis



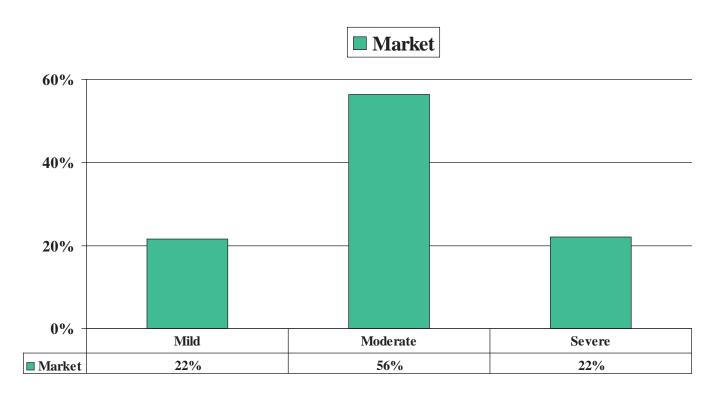
Use by Condition Severity



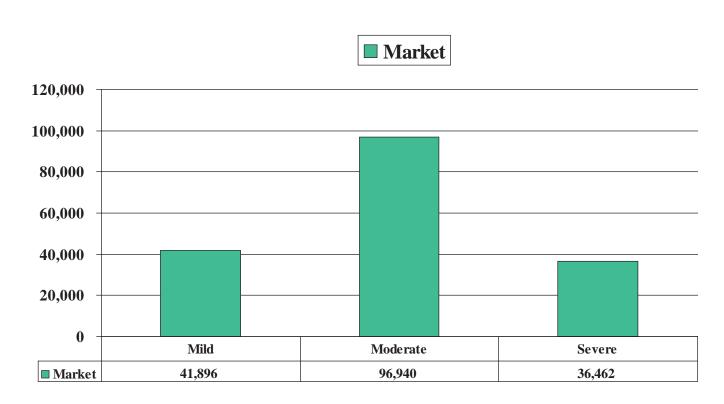
Share by Condition Severity



Use by Condition Severity



Use by Condition Severity Rxs -- 000's



Target Patient Audience

	MS- Contin	OxyContin	Ultram, Ultracet, Ultram SR	Duragesic	Palladone
Back		4	4	4	
Musculo- skeletal	4	4	4	4	
Post-op		4	4		4
Cancer	4	4	4	4	4
Severity	Severe	Mod/Severe	Moderate	Mod/Severe	Severe

Brand Positioning Strategies

	TARGET	PATIENT TYPE	STRATEGY	MESSAGE/ POSITIONING
Palladone	Primary Care, Oncology, Pain Specialists	Severe, Chronic Cancer Pain	Replace MS-Contin in cancer pain	Fewer side effects than morphine More potent than morphine
OxyContin	Primary Care, Oncology, Surgery, Orthopedic Surgery, Pain Specialists	Moderate to severe pain, both cancer & non-cancer	Replace MS-Contin in non- cancer pain, conitinue to replace Percocet	Effective pain control with low side effects and easy dosing for paitients requiring opioid therapy for more than a few days, no morphine stigma
Duragesic	Primary Care, Oncology, Orthopedic Surgery, Pain Specialists	Chronic moderateto severe pain in cancer, back, joint.	Continue to grow cancer pain business while expanding non-cancer business, move down in pain spectrum with lower dosing	Convenient 3 day dosing while providing effective pain control with fewer side effects.
Ultram, Ultracet, Ultram SR	Primary Care, Surgery, Orthopedic Surgery, Pain Specialists	Moderate to Moderately Severe Pain	Continue to grow the business in acute and chronic moderate to moderately severe pain	Non-scheduled alternative
MS-Contin	NONE	NONE	Canabalize with OxyContin, Duragesic, and Palladone	Other products are better

Project Pearl J&J Sales Force Deployment

Issues

- Significant primary detail requirement for all brands
- Potentially 2 launches (ULTRACET & ULTRAM SR) in 6 months to a year
- Unresolved market exclusivity issues with ULTRAM
- ULTRAM SR co-promotion with PF
- Janssen launching DTC campaign with DURAGESIC by mid-year 2001

Project Pearl J&J Sales Force Requirements

Strategy

- Call requirement for primary position drives the need for 2 mirrored office based sales forces and one hospital based sales force
- Each product will require 1+ million contacts each
- PDEs will be determined with the launch of ULTRACET & ULTRAM SR and the DTC launch of DURAGESIC

Project Pearl J&J Sales Force Audience

Audience

- Primary Care
- Pain Specialists
 - Rheumatologists
 - Anesthesiologists
- Other High Volume Prescribers
 - Surgeons
 - Oncologists
 - Neurologists

Project Pearl J&J Sales Force Call Plan

	Sales Force 1 N = 350	Sales Force 2 N = 350	Hospital Sales Force N = 100
Primary Care	Ultracet DURAGESIC® Ultram SR	DURAGESIC® Ultram SR Ultracet	DURAGESIC®/Ultracet/SR
Pain Specialists Rheumatologists Anestheologists All Other Primary Physicians	Ultracet DURAGESIC® Ultram SR	DURAGESIC® Ultram SR Ultracet	DURAGESIC®/Ultracet/SR
All Other HVPs	Ultracet DURAGESIC® Ultram SR	DURAGESIC® Ultram SR Ultracet	DURAGESIC®/Ultracet/SR

Project Pearl J&J/PF Joint Sales Forces

Strategy

- Change J&J sales force from 2 mirrored office based sales force of 350 reps each and a hospital sales force of 100 reps to 1 office/hospital sales force of 700 reps
- PF would mirror the J&J sales force with 700 office/hospital reps

Project Pearl Call Plan Joint JNJ/Purdue

- Mirror Purdue and Janssen sales force
 - Combo territory
 - Fewer JNJ reps needed
- All 5 pain products carried by all representatives
- Rotation of products would develop on 3- to 4-month cycles according to need.

	Purdue	JNJ
	N = 700	N = 700
Primary Care	OxyContin/Palidon	Ultracet/SR/DURAGESIC®
	Ultracet/SR/DURAGESIC®	OxyContin/Palidon
Pain Specialists	OxyContin/Palidon	Ultracet/SR/DURAGESIC®
	Ultracet/SR/DURAGESIC®	OxyContin/Palidon
All other HVPs	OxyContin/Palidon	Ultracet/SR/DURAGESIC®
wareuticals Grown	Ultracet/SR/DURAGESIC®	OxyContin/Palidon
r haceuticals Group		July 31, 2019

Configuration of 350 Person Force

	PDEs	Contacts
Ultram SR	302,400	1,008,000
Ultracet	554,400	1,008,000
DURAGESIC®	756,000	1,008,000